Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

#### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Michael First name  David Middle name  Lies Last name and Suffix (Sr., Jr., II, III)	Melissa First name  Christine Middle name  Lies Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8779	xxx-xx-2153

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**Michael David Lies** Debtor 1 **Melissa Christine Lies** Debtor 2 Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 164 Hawthorne Ln NE Palm Bay, FL 32907 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **Brevard** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one: Why you are choosing

#### Why you are choosing this district to file for bankruptcy

- Over the last 180 days before filing this petition,
   I have lived in this district longer than in any other district.
- ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	btor 1 Michael David Lies btor 2 Melissa Christine	-				Case number (if known)			
Par	rt 2: Tell the Court About	Your Bank	ruptcy Ca	ase					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy							
	choosing to file under	■ Chapt	ter 7						
		☐ Chapt	ter 11						
		☐ Chapt	ter 12						
		☐ Chapt	ter 13						
8.	How you will pay the fee	abo ord a p	out how your ler. If your re-printed	ou may pay. Typically, if yo attorney is submitting you address.	ou are paying the fee ur payment on your be	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money ehalf, your attorney may pay with a credit card or check with			
		The	e Filing Fe	ee in Installments (Official	Form 103A).	otion, sign and attach the <i>Application for Individuals to Pay</i> tion only if you are filing for Chapter 7. By law, a judge may,			
		but app	is not rec olies to yo	quired to, waive your fee, a ur family size and you are	and may do so only if unable to pay the fee	your income is less than 150% of the official poverty line that e in installments). If you choose this option, you must fill out fficial Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your	■ No.	Go to	line 12.					
	residence?	☐ Yes.	Has yo	our landlord obtained an e	viction judgment agai	inst you?			
		_ 100.		No. Go to line 12.	, 5 - 1 - 1 - 3 - 1	•			
					ment About an Evictio	on Judgment Against You (Form 101A) and file it as part of			

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	otor 1 otor 2	Michael David Lies Melissa Christine			Case number (if known)					
Par	t 3:	Report About Any Bu	sinesses `	You Own as a Sole Prop	rietor					
12.	2. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business?									
			☐ Yes. Name and location of business							
	busin an ind separ as a d	e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.		Name of business, if a	ny					
	sole p	have more than one proprietorship, use a rate sheet and attach		Number, Street, City, S	state & ZIP Code					
		nis petition.		Check the appropriate	box to describe your business:					
				☐ Health Care Bu	siness (as defined in 11 U.S.C. § 101(27A))					
				☐ Single Asset R	eal Estate (as defined in 11 U.S.C. § 101(51B))					
				☐ Stockbroker (as	s defined in 11 U.S.C. § 101(53A))					
				☐ Commodity Bro	oker (as defined in 11 U.S.C. § 101(6))					
				☐ None of the ab	ove					
13.	Chap Bank	rou filing under ster 11 of the rruptcy Code and are a small business or?	deadlines operation	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate eadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of perations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 11 U.S.C. 1116(1)(B).						
	For a	definition of small	No.	I am not filing under Ch	napter 11.					
	busin	ess debtor, see 11 C. § 101(51D).	□ No.	I am filing under Chapt Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy					
			☐ Yes.	I am filing under Chapt	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Par	t 4:	Report if You Own or	Have Any	Hazardous Property or A	Any Property That Needs Immediate Attention					
14.	proposition alleger of im	ou own or have any erty that poses or is ed to pose a threat minent and ifiable hazard to	■ No.	What is the hazard?						
	publi Or do prop	c health or safety? byou own any erty that needs ediate attention?		If immediate attention is needed, why is it needed	?					
	perisi livest or a b	xample, do you own hable goods, or ock that must be fed, building that needs tt repairs?		Where is the property?						
	-				Number, Street, City, State & Zip Code					

		Case	e 6:19-bk-07856-KJ Doc 1 Filed :	11/	27/	19 Page 5 of 64
	tor 1 Michael David Lic tor 2 Melissa Christine					Case number (if known)
Part	5: Explain Your Efforts	to Rec	ceive a Briefing About Credit Counseling			
			out Debtor 1:		Abo	out Debtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling.		must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.			must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
	The law requires that you receive a briefing about credit counseling before		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.			Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
	you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.			I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificat of completion.
	file.  If you file anyway, the cour can dismiss your case, you	ı	Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.			Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
will you cre	rill lose whatever filing fee ou paid, and your reditors can begin ollection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver			I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			of the requirement.  To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied
			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.  If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.			with your reasons for not receiving a briefing before you filed for bankruptcy.  If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.			·
			I am not required to receive a briefing about credit counseling because of:			I am not required to receive a briefing about credit counseling because of:
			☐ Incapacity.  I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			☐ Incapacity.  I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			Disability.  My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.			Disability.  My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

military combat zone.

Active duty.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

combat zone.

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	tor 1 Michael David Lie tor 2 Melissa Christine	-			Case nu	umber (if known)	
Part	Answer These Ques	tions for Re	eporting Purposes				
	What kind of debts do you have?	e defined in 11 U.S.C. § 101(8)	as "incurred by an				
	,		individual primarily for a person No. Go to line 16b.	,,,	рагросо.		
			Yes. Go to line 17.				
		16b.	Are your debts primarily busimoney for a business or investi				
			☐ No. Go to line 16c.		•		
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe	e that are not consu	mer debts or bus	siness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do are paid that funds will be avail				nistrative expenses
	administrative expenses are paid that funds will		■ No				
	be available for distribution to unsecured creditors?	I	☐ Yes				
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	)	<b>2</b> 5,001-50,000	
	you estimate that you owe?	□ 50-99		☐ 5001-10,00		☐ 50,001-100,000	0
		☐ 100-19 ☐ 200-99		☐ 10,001-25,0	000	☐ More than100,00	U
19.	How much do you	□ \$0 - \$£	50,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$	1 billion
	estimate your assets to be worth?		01 - \$100,000	\$10,000,00		□ \$1,000,000,001 -	
			001 - \$500,000 001 - \$1 million		1 - \$100 million 01 - \$500 million	□ \$10,000,000,001 □ More than \$50 bi	
20.	How much do you	□ \$0 - \$5	•	□ \$1,000,001		□ \$500,000,001 - \$	
	estimate your liabilities to be?	_	01 - \$100,000	\$10,000,00		\$1,000,000,001	
			001 - \$500,000 001 - \$1 million	_ ' ' '	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		l - \$50 billion illion
		<b>—</b> \$500,0					
Part	7: Sign Below						
For	you	I have exa	amined this petition, and I declar	re under penalty of	perjury that the i	information provided is true and	l correct.
			chosen to file under Chapter 7, I ates Code. I understand the relie				
			rney represents me and I did not t, I have obtained and read the r				I out this
		I request	relief in accordance with the cha	apter of title 11, Unit	ed States Code,	, specified in this petition.	
			and making a false statement, co by case can result in fines up to to				
		/s/ Mich	ael David Lies			Christine Lies	
			David Lies of Debtor 1		Melissa Chr Signature of D		
		Executed	on <b>November 27, 2019</b>		Executed on	November 27, 2019	
			MM / DD / YYYY			MM / DD / YYYY	

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Debtor 1 Debtor 2 Michael David Lie Melissa Christine		Cas	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	d States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, schedules filed with the petition is incorrect.	certify that I have no know	ledge after an inquiry that the information in the
	/s/ Michael Faro	Date	November 27, 2019
	Signature of Attorney for Debtor		MM / DD / YYYY
	Michael Faro 758981		
	Printed name		
	Faro & Crowder		
	Firm name		
	1801 Sarno Road		
	Suite 1		
	Melbourne, FL 32935		
	Number, Street, City, State & ZIP Code		
	Contact phone <b>321-784-8158</b>	Email address	ahinkley@farolaw.com

758981 FL Bar number & State

Fill	I in this information to identify your case:		
Del	btor 1 Michael David Lies		
	First Name Middle Name Last Name		
	btor 2 Melissa Christine Lies  ouse if, filling) First Name Middle Name Last Name		
` '			
Uni	ited States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA		
	se numbernown)	_	Check if this is an amended filing
Su Be a	fficial Form 106Sum  Immary of Your Assets and Liabilities and Certain Statistical Informatio as complete and accurate as possible. If two married people are filing together, both are equally responsible ormation. Fill out all of your schedules first; then complete the information on this form. If you are filing amount of the complete the information on this form. If you are filing amount of the complete the information on this form.	le for sup	
you	r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		•
rai	rt 1: Summarize Your Assets	-	
			our assets alue of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	188,520.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,154.22
	1c. Copy line 63, Total of all property on Schedule A/B	\$	197,674.22
Par	rt 2: Summarize Your Liabilities		
		Yo	our liabilities
		Ar	mount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	o \$	134,991.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		132,176.00
	Your total liabilit	ies \$	267,167.00
Par	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,692.38
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,691.21
Par	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with	ı your othe	er schedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	for a pers	sonal, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the court with your other schedules.	this box a	and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor	<sup>2</sup> Melissa Christine Lies	Case number (if known)	
	rom the Statement of Your Current Monthly Income: Cop 22A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 L		\$ 5,008.59

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Michael David Lies

	Tota	ıl claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	93,317.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	93,317.00

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		Case	0.13-08-076	)JU-IN	J DUC.	ı Fileu i.	1/2//19	rayeı	0 01 04		
Fill	in this inform	ation to identify	your case and t	his filin	g:						
Deb	tor 1	Michael Dav		le Name		Last Name					
	tor 2 use, if filing)	Melissa Chr First Name		le Name		Last Name					
Unit	ed States Ban	kruptcy Court for	the: MIDDLE D	ISTRIC	T OF FLORID	DA					
Cas	e number					_				☐ Check if this is an amended filing	
_		m 106A/E <b>A/B: P</b> i	_							12/15	
Part  1. Do	mation. If more ver every questi	space is needed, ion. Each Residence, Beave any legal or ec	accurate as possib attach a separate s uilding, Land, or O quitable interest in	sheet to t	this form. On t	he top of any add	ditional pages,			pplying correct number (if known).	
1.1	164 Hawthorne Ln NE Street address, if available, or other description			Wha	Single-family Duplex or mu	ty? Check all that ap home ulti-unit building n or cooperative	oply	the amount	of any secured	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.	
	Palm Bay City	FL State	<b>32907</b> ZIP Code		Land Investment p Timeshare	d or mobile home		Describe th	erty? <b>8,520.00</b> ne nature of ye	Current value of the portion you own? \$188,520.00 our ownership interest	
	County			Who	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 1 and At least one er information perty identificat	y I Debtor 2 only of the debtors and you wish to add a	l another about this iten	□ Check (see inst			
			ortion you own fo Part 1. Write that	or all of	your entries	from Part 1, in	cluding any	entries for		\$188,520.00	

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

### Case 6:19-bk-07856-KJ Doc 1 Filed 11/27/19 Page 11 of 64

Debtor 1 Michael David L Debtor 2 Melissa Christin			Case number (if known)	
. Cars, vans, trucks, tractors,	sport utility ve	hicles, motorcycles		
□ No ■ Yes				
3.1 Make: Chrysler  Model: Town & Cour Year: 2012  Approximate mileage: Other information:  VIN: 2C4RC1BG4CR2  Vehicle: electrical iss draining the battery a throttle body, front pa job deteriorated	110,169 260992 ue nd bad	Who has an interest in the property? Check one  □ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another  □ Check if this is community property (see instructions)	Do not deduct secured characteristics who Have Claim Current value of the entire property?  \$4,592.00	ed claims on Schedule D:
3.2 Make: Chrysler  Model: Town & Cour  Year: 2005  Approximate mileage: Other information:  VIN: 2C4GP44R85R3:  Vehicle: electrical proturns lights on randor draining the battery, on the highway due to problems, driverside does not go down, ou paint issues, accident value is optimistic.	120000 85797 bblem mly can't drive o engine window utside	Who has an interest in the property? Check one  □ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	Do not deduct secured characteristics who Have Claim Current value of the entire property?  \$475.00	ed claims on Schedule D:
3.3 Make: Hyundai  Model: Santa Fe  Year: 2004  Approximate mileage: Other information:  VIN: KM8SC13D54U5  Vehicle is driven by D father only. Vehicle d have working air cond	ebtor 2's	Who has an interest in the property? Check one  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another  □ Check if this is community property (see instructions)	Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,000.00	ed claims on Schedule D:
Examples: Boats, trailers, moto  No Yes  Add the dollar value of the	ors, personal wa	nd other recreational vehicles, other vehicles, atercraft, fishing vessels, snowmobiles, motorcycon for all of your entries from Part 2, including that number here	g any entries for	\$5,567.00

portion you own?

Schedule A/B: Property

Official Form 106A/B

Debtor 1 Debtor 2	Michael David Lies Melissa Christine Lies	Case number (if known)
		Do not deduct secured claims or exemptions.
<i>Exampl</i> □ No	old goods and furnishings les: Major appliances, furniture, linens, china, kitchenware  Describe	
	Household: 3 couches 10+ years old with wear coffee tables with wear and tear (\$10) Dining r chairs 10 years old with wear and tear (\$20) 3 and tear (\$15) 3 kids beds (\$25) crib (\$10) nigh dressers with wear and tear (\$15) toaster oven (\$2) utensils (\$5) dishes (\$5) pots and pans (\$2 (\$50) 10+ year old dryer with a rusted top (\$20) tables (\$5) vacuum (\$10) dog crate (\$5) toy che (broken) (\$20) Tools (\$50)	oom table with 6 bar stools with wear it table (\$2) 3 in (\$2) coffee maker 20) cups (\$5) washer i) tv stand (\$5) 2 end
□ No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; con including cell phones, cameras, media players, games  Describe	nputers, printers, scanners; music collections; electronic devices
	Electronics: 32 inch tv 10 years old (\$15) 40 in (\$25) 3 fire tablets (\$30) wii 10 years old with 4 (\$10)	
Exampl	bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, picture other collections, memorabilia, collectibles  Describe	es, or other art objects; stamp, coin, or baseball card collections;
Exampl	ent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, p musical instruments  Describe	pool tables, golf clubs, skis; canoes and kayaks; carpentry tools;
	Sports-Hobby: 3 kids bicycles (\$60) 2 kids sco helmets (\$15)	ooters (\$15) 3 kids \$90.00
■ No	ns  bles: Pistols, rifles, shotguns, ammunition, and related equipment  Describe	
□ No .	<b>s</b> bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessor  Describe	ies
	Clothing	\$25.00
□ No	y  bles: Everyday jewelry, costume jewelry, engagement rings, wedding rings,  Describe	heirloom jewelry, watches, gems, gold, silver

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Debtor 1 Debtor 2	Michael David Lies Melissa Christine Lies	Case number (if known)	
		edding ring (\$50) womens engagement ring ring (\$20) 2 womens gold necklaces (\$20) ) mens watch (\$15)	\$195.00
<i>Exam<sub>l</sub></i> □ No	rm animals oles: Dogs, cats, birds, horses Describe		
	Animals: dog cat		\$0.00
■ No	her personal and household items you d	lid not already list, including any health aids you did not list	
	the dollar value of all of your entries fron art 3. Write that number here	n Part 3, including any entries for pages you have attached	\$796.00
Part 4: De	scribe Your Financial Assets		
	vn or have any legal or equitable interest	t in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	oles: Money you have in your wallet, in your	home, in a safe deposit box, and on hand when you file your petition	
		Cash: 0	\$0.00
	its of money oles: Checking, savings, or other financial a institutions. If you have multiple accou	ccounts; certificates of deposit; shares in credit unions, brokerage honts with the same institution, list each.	uses, and other similar
_		Institution name:	
	17.1.	Checking Account: Space Coast Credit Union	\$2,751.72
	17.2.	Checking Account: Chase Bank	\$34.50
	17.3.	Savings Account: Space Coast Credit Union	\$5.00
	, mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with		
■ No □ Yes.	Institution or issu	er name:	
joint v	ublicly traded stock and interests in inco enture	rporated and unincorporated businesses, including an interest i	n an LLC, partnership, and
■ No □ Yes.	Give specific information about them		

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Debtor Debtor		es		Case number (if known)	
Ne	<i>gotiable instrument</i> s include p	ersonal checks, cas	ntiable and non-negotiable instructions; checks, promissory notes, a insfer to someone by signing or de	nd money orders.	
■ N □ Y	es. Give specific information a	bout them er name:			
	•		.03(b), thrift savings accounts, or c	ther pension or profit-sharing plans	
<b>■</b> Y	es. List each account separate	ely. of account:	Institution name:		
	1,400 0	n dooddin.	FRS		Unknown
			<u> FN3</u>	<u> </u>	Olikilowii
You Exa	amples: Agreements with land	s you have made so	that you may continue service or public utilities (electric, gas, water)	use from a company , telecommunications companies, or	others
■ N	es		Institution name or individu	al:	
23. <b>Anr</b>	nuities (A contract for a period	lic payment of mone	ey to you, either for life or for a nun	nber of years)	
■ N		e and description.			
	00	•		100 1	
	rests in an education IRA, in J.S.C. §§ 530(b)(1), 529A(b), a		ualified ABLE program, or unde	r a qualified state tuition program.	
■ N	· <del></del>	ame and description	n. Separately file the records of an	v interests 11 U.S.C. § 521(c):	
		•		- , ,	la for your banafit
25. Tru:		ests in property (o	ther than anything listed in line	1), and rights or powers exercisab	le for your benefit
☐ Y	es. Give specific information	about them			
	amples: Internet domain name		nd other intellectual property ds from royalties and licensing ago	reements	
` `	les. Give specific information	about them			
	, , ,		es erative association holdings, liquo	r licenses, professional licenses	
Y	es. Give specific information a	about them			
		Teahcing certific	cate		\$0.00
Money	or property owed to you?			<b>p</b> i D	urrent value of the ortion you own? o not deduct secured aims or exemptions.
□и		bout them, including	g whether you already filed the ret	urns and the tax years	
		Anticipat	ed 2019 Tax Refund		Unknown

### Case 6:19-bk-07856-KJ Doc 1 Filed 11/27/19 Page 15 of 64

Debtor 1 Debtor 2		Case number (if known)	
<i>Exar</i> ■ No	ily support  mples: Past due or lump sum alimony, spousal support, child support, n  s. Give specific information	naintenance, divorce settlement, property	settlement
<i>Exar</i> ■ No	r amounts someone owes you  mples: Unpaid wages, disability insurance payments, disability benefits, benefits; unpaid loans you made to someone else  s. Give specific information	, sick pay, vacation pay, workers' compe	nsation, Social Security
31. Intere	ests in insurance policies  mples: Health, disability, or life insurance; health savings account (HSA	;); credit, homeowner's, or renter's insura	nce
	s. Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
	Insurance: Home owners insurance		\$0.00
	Geico Car Insurance		\$0.00
	Life Insurance through employer	Melissa Lies	\$0.00
If you some ■ No □ Yes  33. Clain Exar	s. Give specific information  ns against third parties, whether or not you have filed a lawsuit or mples: Accidents, employment disputes, insurance claims, or rights to s	made a demand for payment	eive property because
34. <b>Othe</b> No	r contingent and unliquidated claims of every nature, including co	unterclaims of the debtor and rights to	set off claims
	s. Describe each claim		
■ No	financial assets you did not already list s. Give specific information		
	d the dollar value of all of your entries from Part 4, including any e Part 4. Write that number here		\$2,791.22
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In. Li	st any real estate in Part 1.	
No. 0	u own or have any legal or equitable interest in any business-related proper Go to Part 6. Go to line 38.	rty?	
	Describe Any Farm- and Commercial Fishing-Related Property You Own or f you own or have an interest in farmland, list it in Part 1.	Have an Interest In.	
46. <b>Do</b> yo	ou own or have any legal or equitable interest in any farm- or com	mercial fishing-related property?	

Official Form 106A/B Schedule A/B: Property page 6

No. Go to Part 7.

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	otor 1 otor 2	Michael David Lies Melissa Christine Lies		Case number (if known)	
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
		have other property of any kind you did not already list? les: Season tickets, country club membership	•		
I	Yes. 0	Give specific information			
		Passes to the Brevard Zoo (exp	re in December 20	019)	\$0.00
54.		ne dollar value of all of your entries from Part 7. Write that List the Totals of Each Part of this Form	at number here		\$0.00
55.	Part 1	: Total real estate, line 2			\$188,520.00
56.	Part 2	: Total vehicles, line 5	\$5,567.00		
57.	Part 3	: Total personal and household items, line 15	\$796.00		
58.	Part 4	: Total financial assets, line 36	\$2,791.22		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$9,154.22	Copy personal property to	tal <b>\$9,154.22</b>
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$197,674.22

-	ll in this inform	nation to identify your case:				1	
	ebtor 1						
DE	ו וטוטו	Michael David Lies First Name	/liddle Name	L	ast Name		
	ebtor 2	Melissa Christine Lies					
(Sp	oouse if, filing)		/liddle Name		ast Name		
Ur	nited States Bar	hkruptcy Court for the: MIDD	LE DISTRICT OF FLO	RIDA			
	ase number						
(if k	known)					☐ Check if t amended	
$\bigcap$	fficial For	m 106C				_	
			ety Vou Cla		as Everent		
<u> </u>	cnedule	e C: The Proper	ty You Cla	um	as Exempt		4/19
the nee	property you lis	sted on <i>Schedule A/B: Property</i> I attach to this page as many co	(Official Form 106A/B)	as yo	ther, both are equally responsible for bur source, list the property that you age as necessary. On the top of any	claim as exempt. If mo	re space is
spe any fun exe	ecific dollar and y applicable stands—may be un emption to a pa	nount as exempt. Alternatively atutory limit. Some exemption nlimited in dollar amount. How	y, you may claim the f is—such as those for wever, if you claim an	ull fai heal exen	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu letermined to exceed that amount	ing exempted up to the enefits, and tax-exeme e under a law that lim	ne amount of pt retirement its the
Pa	rt 1: Identify	y the Property You Claim as E	exempt				
1.	Which set of	exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.		
	You are cla	niming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	☐ You are cla	niming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any prop	erty you list on Schedule A/B	that you claim as exe	empt.	fill in the information below.		
	Brief description	Brief description of the property and line on   Current value of the   Amount of the exemption you claim				Specific laws that allo	w exemption
	Schedule A/B t	hat lists this property	portion you own  Copy the value from  Schedule A/B	Che	eck only one box for each exemption.		
	164 Hawtho	rne Ln NE Palm Bay, FL	\$188,520.00			Fla. Const. art. X,	
	square feet	3 bedroom 2 bath 1700 1981 edule A/B: 1.1		-	100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. §§ 222.01 & 222.02	
		ler Town & Country	\$4,592.00		\$2,000.00	Fla. Stat. Ann. § 2	22.25(1)
	110,169 mile VIN: 2C4R0	es C1BG4CR260992			100% of fair market value, up to		
	battery and panel paint	ctrical issue draining the bad throttle body, front job deteriorated edule A/B: 3.1			any applicable statutory limit		
		ler Town & Country	\$4,592.00		\$2,000.00	Fla. Const. art. X,	§ 4(a)(2)
	110,169 mile VIN: 2C4R0	es C1BG4CR260992	·		100% of fair market value, up to		
	battery and	ctrical issue draining the bad throttle body, front job deteriorated			any applicable statutory limit		

Official Form 106C

Line from Schedule A/B: 3.1

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Debtor 2				Case number (if known)	
	ef description of the property and line on needule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
Cr	ecking Account: Space Coast edit Union e from <i>Schedule A/B</i> : 17.1	\$2,751.72		\$2,335.81  100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.11(2)(a)
Cr	ecking Account: Space Coast edit Union e from Schedule A/B: 17.1	\$2,751.72		\$415.91  100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.11(2)(c)
	ecking Account: Chase Bank e from Schedule A/B: 17.2	\$34.50		\$34.50  100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.11(2)(a)
<b>FR</b> Lin	S e from <i>Schedule A/B</i> : <b>21.1</b>	Unknown	□	100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 122.15
	ticipated 2019 Tax Refund e from Schedule A/B: 28.1	Unknown	■	100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(3)
	surance: Home owners insurance e from Schedule A/B: 31.1	\$0.00		100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(1); Fla. Stat. Ann. §§ 222.01 & 222.02
	ico Car Insurance e from Schedule A/B: 31.2	\$0.00	■	100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(2)
Ве	e Insurance through employer neficiary: Melissa Lies e from <i>Schedule A/B</i> : 31.3	\$0.00	■	100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.14
	e you claiming a homestead exemption abject to adjustment on 4/01/22 and every No Yes. Did you acquire the property cover  No Yes	3 years after that for ca	ises fi	·	,

	Case 0.1	.9-DK-07630-K3 DOC 1 Filed 13	LIZIII9 Pag	E 19 01 04	
Fill in this inform	ation to identify you	r case:			
Debtor 1	Michael David L	ies			
Bester 1	First Name	Middle Name Last Name			
Debtor 2	Melissa Christin	e Lies			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ban	kruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA			
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
Official Form	106D				
		Miles I I avec Olations Consumed	la a Dana a a sata	_	
Schedule I	D: Creditors	Who Have Claims Secured	by Propert	<u>y                                    </u>	12/15
is needed, copy the		f two married people are filing together, both are equa out, number the entries, and attach it to this form. On			
number (if known).	have claims secured by	vyour proporty?			
	•	, , , ,	, have nothing also t	a ranget on this form	
_		nis form to the court with your other schedules. You .	u nave notning eise t	o report on this form.	
	all of the information	pelow.			
Part 1: List All	Secured Claims		Calumn A	Calumn D	Column C
		nore than one secured claim, list the creditor separately	Column A	Column B	
		a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim  Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	<b>.</b>	value of collateral.	claim	if any
2.1 Mr. Coope Creditor's Name		Describe the property that secures the claim:	\$134,991.00	\$188,520.00	\$0.00
Oreditor 3 Name		164 Hawthorne Ln NE Palm Bay, FL 32907			
Attn. Danie		Residence: 3 bedroom 2 bath 1700			
Attn: Bank		square feet 1981			
Blvd	ess Waters	As of the date you file, the claim is: Check all that			
Coppell, T	X 75019	apply.			
		Contingent			
Number, Street,	City, State & Zip Code	Unliquidated			
Who owes the del	ht? Chack and	Disputed  Nature of lien. Check all that apply.			
_	ot: Check one.	☐ An agreement you made (such as mortgage or secu	rod		
Debtor 1 only		car loan)	reu		
Debtor 2 only					
Debtor 1 and Del	=	Statutory lien (such as tax lien, mechanic's lien)			
	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla		Other (including a right to offset)			
Date debt was incu	rred	Last 4 digits of account number 9183			
Add the dollar val	lue of your entries in C	olumn A on this page. Write that number here:	\$134,99	1.00	
	page of your form, add	the dollar value totals from all pages.	\$134,99		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

	30.33 3.23			// : age	
Fill in this infor	mation to identify your c	ase:			
Debtor 1	Michael David Lie	S			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Melissa Christine First Name	Lies Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case number (if known)					☐ Check if this is an amended filing
Official Forr Schedule E	n 106E/F E/F: Creditors W	ho Have Unsec	ured Claims		12/15
any executory con Schedule G: Execu Schedule D: Credit eft. Attach the Con name and case nu	tracts or unexpired leases to utory Contracts and Unexpitors Who Have Claims Secuntinuation Page to this page	that could result in a claim red Leases (Official Form ired by Property. If more s e. If you have no informati	<ul> <li>Also list executory of 106G). Do not include pace is needed, copy</li> </ul>	ontracts on Schedule A/B: Prop any creditors with partially secu the Part you need, fill it out, num	ORITY claims. List the other party to erty (Official Form 106A/B) and on red claims that are listed in iber the entries in the boxes on the of any additional pages, write your
	ors have priority unsecured				
■ No. Go to F	Part 2.				
☐ Yes.					
	All of Your NONPRIORIT				
3. Do any credit	ors have nonpriority unsec	ured claims against you?			
☐ No. You ha	ave nothing to report in this pa	art. Submit this form to the c	ourt with your other scho	edules.	
Yes.					
unsecured clai	im, list the creditor separately	for each claim. For each cla	aim listed, identify what t	b holds each claim. If a creditor ha ype of claim it is. Do not list claims three nonpriority unsecured claims	already included in Part 1. If more
					Total claim
4.1 Affirm	Inc	Last 4 digit	s of account number	LUDB	\$913.00
Affirm Po Box	-	When was	the debt incurred?	Opened 03/19 Last Acti 9/11/19	ive
Number S	ancisco, CA 94104 Street City State Zip Code urred the debt? Check one.	As of the d	ate you file, the claim	s: Check all that apply	
☐ Debto	r 1 only	☐ Continge	ent		
■ Debto	r 2 only	☐ Unliquid	ated		
☐ Debto	r 1 and Debtor 2 only	☐ Disputed	d		
☐ At leas	st one of the debtors and ano	ther Type of NC	NPRIORITY unsecure	d claim:	
☐ Check	k if this claim is for a comm	nunity	loans		
debt	im subject to offset?	Obligation		ration agreement or divorce that yo	ou did not
Is the cia	iiii subject to onset?		•	g plans, and other similar debts	
				g pians, and other similar debts	
☐ Yes		Other. S	pecify Unsecured		

	Melissa Christine Lies		Case number (if known)			
4.2	Capital One	Last 4 digits of account number	2312	\$2,676.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 09/16 Last Active 9/09/19	Ψ2,010.00		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	■ Other. Specify Credit Card	<u> </u>			
4.3	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	0480	\$4,566.00		
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/15 Last Active 7/26/19			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharin				
	Yes	Other. Specify Credit Card	<u> </u>			
4.4	Capital One Bank Usa N  Nonpriority Creditor's Name	Last 4 digits of account number	7606	\$889.00		
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 12/08 Last Active 9/12/19			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	_				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			

	Melissa Christine Lies		Case number ( <sub>if known</sub> )				
4.5	Chase Card Services	Last 4 digits of account number	5742	\$5,615.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 11/11 Last Active 7/13/19	<b>V</b> 2,72 2 2 2 2			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.6	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	2354	\$2,256.00			
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 05/15 Last Active 7/06/19				
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	Other. Specify Credit Card	<u> </u>				
4.7	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	2482	\$1,099.00			
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 10/17 Last Active 9/18/19				
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Credit Card	<u> </u>				

Debtor Debtor	1 Michael David Lies 2 Melissa Christine Lies		Case number (if known)					
4.8	Chase Card Services	Last 4 digits of account number	0474	\$571.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298	When was the debt incurred?	Opened 06/16 Last Active 8/22/19	40				
	Wilmington, DE 19850  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans	- Gui					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Credit Card	<u> </u>					
4.9	Citibank	Last 4 digits of account number	4440	\$1,311.00				
	Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 12/12 Last Active 9/09/19					
	St Louis, MO 63179  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim						
	Debtor 1 only	Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Credit Card	<u> </u>					
4.1	Department of Education/Nelnet	Last 4 digits of account number	7474	\$6,069.00				
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 08/09 Last Active 10/14/16					
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	☐ Debtor 1 only	☐ Contingent						
	■ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt	<ul><li>■ Student loans</li><li>□ Obligations arising out of a sepa</li></ul>						
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plans, and other similar debts					
	■ No □ Yes	☐ Other. Specify	g piano, and other offillial debte					
	<b>□</b> 165	Educationa	II					

Debtor :	Melissa Christine Lies  Melissa Christine Lies		Case number (if known)	
4.1	Department of Education/Nelnet	Last 4 digits of account number	7274	\$4,590.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 07/09 Last Active 10/14/16	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify		
		Educationa	l	
4.1	Department of Education/Nelnet	Last 4 digits of account number	7374	\$3,910.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 07/09 Last Active 10/14/16	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a sepa report as priority claims</li></ul>	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
	□ Yes	☐ Other. Specify	g plans, and other similar debts	
	Li res	Educationa	<u> </u>	
4.1	Department of Education/Nelnet	Last 4 digits of account number	7574	\$3,910.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 08/09 Last Active 10/14/16	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Пол		
	Debtor 1 only	☐ Contingent☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	I	

or 2 Melissa Christine Lies		Case number (if known)	
Deptartment Store National Bank/Macy's	Last 4 digits of account number	2081	\$2,191.00
Nonpriority Creditor's Name Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040	When was the debt incurred?	Opened 06/03 Last Active 9/14/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Kohls/Capital One	Last 4 digits of account number	7574	\$1,634.00
Nonpriority Creditor's Name Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 12/13 Last Active 8/03/19	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	O continuent		
Debtor 2 only	☐ Contingent		
Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
_	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Kohls/Capital One	Last 4 digits of account number	1538	\$140.00
Nonpriority Creditor's Name Attn: Credit Administrator Po Box 3043	When was the debt incurred?	Opened 11/16 Last Active 11/04/19	
Milwaukee, WI 53201  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	O continuent		
Debtor 2 only	☐ Contingent		
☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other, Specify Charge Acc	count	

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Debtor :	Michael David Lies Melissa Christine Lies	Case number (if known)		
4.1	Nelnet Loans	Last 4 digits of account number	3099	\$8,403.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 08/07 Last Active 8/21/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	<u> </u>	
4.1 8	Nelnet Loans Nonpriority Creditor's Name	Last 4 digits of account number	8774	\$8,202.00
	Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 08/06 Last Active 6/11/18	
-	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a separeport as priority claims</li></ul>	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No	☐ Other. Specify	g plans, and other similar debts	
	res	Educationa		
9	Nelnet Loans Nonpriority Creditor's Name	Last 4 digits of account number	2999	\$7,231.00
	Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 08/07 Last Active 1/30/18	
-	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	<del></del>	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa		

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Debtor 2	Michael David Lies Melissa Christine Lies	Case number (if known)		
4.2 0	Nelnet Loans	Last 4 digits of account number	7699	\$7,147.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 09/06 Last Active 8/21/19	
_	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	<u> </u>	
	Nelnet Loans	Last 4 digits of account number	7499	\$6,779.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 08/05 Last Active 1/30/18	
_	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	<u> </u>	
4	NeInet Loans Nonpriority Creditor's Name	Last 4 digits of account number	7399	\$4,633.00
	Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 09/04 Last Active 1/30/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	_	i Ciaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a sepa report as priority claims</li></ul>	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	■ Yes		·	
	<b>ப</b> 165	Educations		

Debtor :	1 Michael David Lies 2 Melissa Christine Lies		Case number (if known)		
4.2	Nelnet Loans	Last 4 digits of account number	7999		\$4,601.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 09/06 Las 1/30/18	t Active	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l claim:		
	At least one of the debtors and another	Student loans	i Ciaiiii.		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	<ul> <li>Student loans</li> <li>Obligations arising out of a separeport as priority claims</li> </ul>	ration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar de	ahte	
	■ No □ Yes	_			
	☐ Yes	☐ Other. Specify	1		
		Educationa	<u> </u>		
4.2	Nelnet Loans	Last 4 digits of account number	2074		\$4,596.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 07/07 Last 6/11/18	t Active	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts	
	☐ Yes	Other. Specify			
		Educationa	<u>I</u>		
4.2 5	Nelnet Loans	Last 4 digits of account number	8574		\$4,258.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 08/05 Las: 6/11/18	t Active	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	1.1.1.		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	ı cıaım:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts	
	□ Yes	☐ Other. Specify			
		Educationa	 I		

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Debtor :	1 Michael David Lies 2 Melissa Christine Lies		Case number (if known)	
4.2 6	Nelnet Loans	Last 4 digits of account number	8199	\$3,615.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 05/07 Last Active 1/30/18	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	<u> </u>	
4.2 7	Nelnet Loans	Last 4 digits of account number	8474	\$3,225.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 09/04 Last Active 6/11/18	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a sepa report as priority claims</li></ul>	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
	□ Yes	☐ Other. Specify	g plans, and other similar debts	
	□ Yes	Educationa		
4.2	Nelnet Loans	Last 4 digits of account number	7899	\$2,808.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims		Opened 05/07 Last Active	. ,
	Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	8/21/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify		
		Educationa		

Debtor :	Michael David Lies Melissa Christine Lies		Case number (if known)	
4.2	Nelnet Loans	Last 4 digits of account number	7599	\$2,782.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 05/06 Last Active 1/30/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	<u>I</u>	
4.3 0	Nelnet Loans	Last 4 digits of account number	8099	\$2,629.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 10/06 Last Active 1/30/18	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	l .	
4.3	Nelnet Loans	Last 4 digits of account number	8674	\$2,150.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 05/06 Last Active 6/11/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify		
		Educationa	I	

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Debto Debto	or 1 Michael David Lies Melissa Christine Lies	Case number (if known)		
4.3 2	Nelnet Loans	Last 4 digits of account number	7799	\$1,779.00
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 10/06 Last Active 8/21/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
		Educationa		
4.3 3	Space Coast Credit Union	Last 4 digits of account number	9783	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy 8045 North Wickham Road Melbourne, FL 32940	When was the debt incurred?	Opened 08/00 Last Active 6/01/17	
	Number Street City State Zip Code	As of the date you file, the claim i	he date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	<u> </u>	
4.3	Syncb/HSN	Last 4 digits of account number	5121	\$265.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 05/16 Last Active 11/05/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	ount	

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Syncb/PPC	Last 4 digits of account number	3888	\$2,398.00
Nonpriority Creditor's Name	_	Opened 00/40 Lept Active	
Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 09/18 Last Active 10/04/19	
Orlando, FL 32896	When was the dept incurred:	10/04/19	
lumber Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Vho incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	-	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Credit Card		
Syncb/walmart	Last 4 digits of account number	6868	\$579.00
Nonpriority Creditor's Name		Opened 02/47 Lept Active	
Attn: Bankruptcy PO Box 965060	When was the debt incurred?	Opened 03/17 Last Active 9/01/19	
Orlando, FL 32896	When was the dept incurred:	3/01/13	
umber Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
/ho incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
Check if this claim is for a community	☐ Student loans		
ebt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	ration agreement of arverse that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
ynchrony Bank/ JC Penneys onpriority Creditor's Name	Last 4 digits of account number	7510	\$1,379.00
Attn: Bankruptcy		Opened 12/08 Last Active	
Po Box 956060	When was the debt incurred?	7/26/19	
Prlando, FL 32896	_		
umber Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Vho incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	

Debto Debto	r 1 Michael David Lies r 2 Melissa Christine Lies		Case number (if known)	
1.3	Synchrony Bank/Amazon	Last 4 digits of account number	5458	\$2,633.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 11/12 Last Active 10/10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
1.3	Synchrony Bank/Amazon  Nonpriority Creditor's Name	Last 4 digits of account number	1302	\$1,019.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 11/12 Last Active 8/28/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
1.4	Synchrony Bank/QVC  Nonpriority Creditor's Name	Last 4 digits of account number	9978	\$108.00
	Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 06/16 Last Active 10/18/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	a plane, and other similar debte	
	■ No			
	☐ Yes	Other Specify Charge Acc	count	

### Case 6:19-bk-07856-KJ Doc 1 Filed 11/27/19 Page 34 of 64

Debto Debto	mr 1 Michael David Lies mr 2 Melissa Christine Lies		Case number (if known)	
4.4 1	Target	Last 4 digits of account number	6061	\$2,776.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9475 Minneapolis, MN 55440	When was the debt incurred?	Opened 12/13 Last Active 10/20/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
		Student loans	a didiiii.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐Yes	Other. Specify Credit Card	<u> </u>	
4.4	Target  Nonpriority Creditor's Name	Last 4 digits of account number	7660	\$389.00
	Attn: Bankruptcy Po Box 9475 Minneapolis, MN 55440	When was the debt incurred?	Opened 12/08 Last Active 10/17/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.4	USAA Federal Savings Bank	Last 4 digits of account number	7802	\$3,452.00
	Nonpriority Creditor's Name Attn: Bankruptcy 10750 Mcdermott Freeway San Antonio, TX 78288	When was the debt incurred?	Opened 04/10 Last Active 9/05/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane, and other similar 3-14-	
	■ No	☐ Debts to pension or profit-sharin		
	☐ Yes	■ Other. Specify Credit Card		

Part 3: List Others to Be Notified About a Debt That You Already Listed

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Debtor 1	Michael David Lies		
Debtor 2	Melissa Christine Lies	Case number (if known)	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	93,317.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		•	0.00
	C.L.	you did not report as priority claims	6g.	\$	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	38,859.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	132,176.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor	mation to identify your	case:			
Debtor 1	Michael David Lie				
	First Name	Middle Name	Last Name		
Debtor 2	Melissa Christine				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA			
Case number					
(if known)					☐ Check if this is an
					amended filing

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th	e contract or lease	State what the contract or lease is for		
2.1							
	Name						
	Number	Street					
	City		State	ZIP Code	_		
2.2							
	Name						
	Number	Street			_		
	City		State	ZIP Code	_		
2.3	<u> </u>		<u> </u>				
	Name						
	Number	Street			_		
	City		State	ZIP Code	_		
2.4							
	Name						
	Number	Street			<u> </u>		
	City		State	ZIP Code	_		
2.5	City		Olato	211 0000			
	Name				_		
	Number	Street					
	City		State	ZIP Code	<u> </u>		

Official Form 106G

## Case 6:19-bk-07856-KJ Doc 1 Filed 11/27/19 Page 37 of 64

Fill in this	information to identify	your case:			
Debtor 1	Michael Dav	rid Lies			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	Melissa Chr First Name	istine Lies  Middle Name	Last Name		
	3,				
United Stat	es Bankruptcy Court fo	the: MIDDLE DISTRICT	OF FLORIDA		
Case numb	per				
(if known)				☐ Check if this is an	
				amended filing	
Official	Form 106H				
	ule H: Your (	Codobtors		40/45	
Scried	ule n. Tour C	ouentors -		12/15	
ill it out, ar your name	nd number the entries and case number (if k	in the boxes on the left. An nown). Answer every ques	tach the Additional Page to this tion.	f more space is needed, copy the Additional Pag s page. On the top of any Additional Pages, write	
1. Do y	ou have any codebtor	's? (If you are filing a joint ca	ase, do not list either spouse as a	codebtor.	
■ No					
☐ Yes					
			ty property state or territory? (Co., Puerto Rico, Texas, Washingtor	Community property states and territories include n, and Wisconsin.)	
	Go to line 3.	er spouse, or legal equivaler	at live with you at the time?		
Li res.	. Dia your spouse, form	er spouse, or legal equivaler	it live with you at the time?		
in line Form 1 out Co	2 again as a codebtor 106D), Schedule E/F (Column 2. Column 1: Your codebt	only if that person is a gu Official Form 106E/F), or So or	arantor or cosigner. Make sure hedule G (Official Form 106G).	ur spouse is filing with you. List the person show you have listed the creditor on Schedule D (Office Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb	ial fil
N	lame, Number, Street, City, Sta	te and ZIP Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
<u> </u>	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street				
(	City	State	ZIP Code		
3.2				☐ Schedule D. line	_
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street				
	City	State	ZIP Code		

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De	btor 1 Michael Dav	vid Lies		
	btor 2 Melissa Chi	ristine Lies		
Un	ited States Bankruptcy Court for the	e: MIDDLE DISTRICT C	OF FLORIDA	
_	se number nown)		-	Check if this is:  An amended filing  A supplement showing postpetition chapter
$\sim$	fficial Form 1061			13 income as of the following date:
	fficial Form 106l	ama		MM / DD/ YYYY
	chedule I: Your Inc			12/15 and Debtor 2), both are equally responsible for
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,		■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	teacher	Substitute Teacher
	Include part-time, seasonal, or self-employed work.	Employer's name	Brevard Public Schools	Brevard Public Schools
	Occupation may include student or homemaker, if it applies.	Employer's address	2700 Judge Fran Jamiesor Way Viera, FL 32940	2700 Judge Fran Jamieson Way Viera, FL 32940
		How long employed t	here? 11 years, 3 months	s 8 years
Pa	rt 2: Give Details About Mo	nthly Income		
Fst	imate monthly income as of the cuse unless you are separated.	late you file this form.  f	you have nothing to report for any	line, write \$0 in the space. Include your non-filing
	•			
spo If yo	ou or your non-filing spouse have me space, attach a separate sheet to		ombine the information for all emplo	oyers for that person on the lines below. If you need

**List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3,630.20 807.15 2. 2. Estimate and list monthly overtime pay. +\$ 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 3,630.20 807.15

Schedule I: Your Income Official Form 106I page 1

Debt Debt		Michael David Melissa Christi							C	ase num	iber (if k	nown)				
									1	For Del	btor 1			or Debtor		
	Сор	y line 4 here						4.		\$	3,63	0.20	\$	· · · · · · · · · · · · · · · · · · ·	807.15	_
_	Liet															_
5.		all payroll deduct			4!			<b>-</b> -	,	Φ.	40		•		00.55	
	5a. 5b.	Tax, Medicare, a Mandatory cont		-				5a. 5b.		\$ \$		9.31	\$ \$		82.55	_
	5c.	Voluntary contr			•			5c.		\$		0.26 0.00	\$		0.00	_
	5d.	Required repay			-			5d.		\$		0.00	\$		0.00	_
	5e.	Insurance						5e.		\$		5.33	\$		0.00	_
	5f.	Domestic suppo	ort obligation	s				5f.	9	\$		0.00	\$		0.00	_
	5g.	Union dues						5g.	9	\$		0.00	\$		0.00	_
	5h.	Other deduction	<b>ns.</b> Specify: _	Vision				_ 5h.		\$		3.56			0.00	_
		Dental						_		\$		4.28	\$		0.00	_
		Dep Life Ins.						_		\$		2.60	\$		0.00	_
		Life Ins.	num Diaabilii	h.,				_		\$		7.66	\$ \$		0.00	_
		Aflac Short Te	erin Disabilit	Ly				-		\$		3.42 6.00	\$		0.00	_
•	امام ۸	-	-4:			5( . 5 5)		-		· —						-
6.		the payroll deduc				•		6.	\$			2.42	\$		82.55	_
7.	Cald	culate total month	ly take-home	pay. Subt	tract line 6	from line 4.		7.	\$	<u> </u>	2,96	7.78	\$		724.60	_
9.	8a. 8b. 8c. 8d. 8e. 8f.	all other income in Net income from profession, or factach a statemer receipts, ordinary monthly net incollinerest and div Family support regularly receive Include alimony, settlement, and punemployment Social Security Other governme Include cash asset that you receive, Nutrition Assistant Specify:  Pension or retir Other monthly in all other income.	n rental properarm ent for each properarm y and necessal me. ridends payments that e spousal supportoperty settler compensatio ent assistance sistance and the such as food nce Program) rement income. Speci	perty and from perty and from perty and from perty and from perty and perty	business s s expenses on-filing s upport, mai regularly known) of enefits und subsidies.	showing gros s, and the tot spouse, or a intenance, di receive any non-cast er the Supple	s al dependent vorce	8a. 8b. 8c. 8d. 8e.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		0.00 0.00 0.00 0.00 0.00 0.00 0.00	- - - - -
10.		culate monthly inc the entries in line 1				n-filina spouse		0. \$	\$	2,9	67.78	+ \$		724.60	= \$ _	3,692.38
	Stat Incluothe Do r Spe	e all other regular ude contributions fro or friends or relative not include any amo cify: the amount in the e that amount on the	r contribution om an unmarri es. ounts already i	s to the exical partner ncluded in of line 10	kpenses the members lines 2-10	hat you list in s of your house or amounts to	n Schedule sehold, your of that are not a	deper	ble	to pay o	expens	ses lis	ted in	n <i>Schedul</i> 11. ne.	e J. +\$	0.00
	αμμ	100													Com. 1.	•
13.	Do y	<b>/ou expect an inci</b> No. Yes. Explain:	rease or decr	ease withi	n the year	r after you fil	le this form?	•							Combi month	ned y income

Fill in t	this informa	tion to identify yo	our case:						
Debtor	· 1	Michael Dav	id Lies			Ch	neck i	f this is:	
								amended filing	
Debtor		Melissa Chri	stine Lie	s					ving postpetition chapter the following date:
Spous	se, if filing)						13	expenses as or	the following date.
United	States Bankr	ruptcy Court for the	: MIDDL	E DISTRICT OF FLORIDA			M	M / DD / YYYY	
Case no									
Offi	icial Fo	rm 106J							
Sch	nedule	J: Your	Exper	ises					12/
Be as inform	complete nation. If m	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this					
Part 1:		ibe Your House	hold						
	s this a joir								
_	☐ No. Go to								
•			in a separ	ate household?					
	■ N □ Y		st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate Housel	nold of De	ebtor	2.	
o <b>5</b>			_	-, -, -, -, -, -, -, -, -, -, -, -, -, -	p				
2. <b>D</b>	o you hav	e dependents?	☐ No						
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
D	Do not state	the							□ No
	dependents				Daughter			2	Yes
									□ No
					Son			5	■ Yes
									□ No
					Daughter			9	Yes
					<b>.</b>				□ No
	_				Daughter				Yes
е	expenses o	penses include f people other to d your depende	han _	No Yes					
Part 2:		ate Your Ongoi		ly Expenses uptcy filing date unless y	ou are using this fo	rm as a	siinn	lement in a Cha	inter 13 case to report
expen				y is filed. If this is a supp					
				government assistance i					
	ial Form 10		a nave in	cluded it on <i>Schedule I:</i> \	rour income		_	Your exp	enses
		or home owners		nses for your residence. I or lot.	nclude first mortgage	4.	\$_		1,079.21
If	f not includ	led in line 4:							
4	la. Real e	estate taxes				4a.	\$		0.00
4	lb. Prope	rty, homeowner's	s, or renter	's insurance		4b.			0.00
				upkeep expenses		4c.			100.00
		owner's associat			ma aquitulas -	4d.	_		0.00
5. <b>A</b>	-auitional f	nortgage payme	ents for y	<b>our residence,</b> such as ho	me equity loans	5.	Ф		0.00

	otor 1 otor 2		David Lies Christine Lies	Case num	ber (if known)	
6.	Utilit	ies:				
-	6a.		y, heat, natural gas	6a.	\$	275.00
	6b.	Water, se	ewer, garbage collection	6b.	\$	60.00
	6c.		ne, cell phone, Internet, satellite, and cable services	6c.	\$	245.00
	6d.	Other. Sp	pecify:	6d.		0.00
7.	Food	d and hous	sekeeping supplies		\$	1,100.00
8.			children's education costs	8.	\$	300.00
9.	Cloth	hing, laund	dry, and dry cleaning	9.	\$	0.00
10.		•	products and services	10.	\$	75.00
			ental expenses	11.	\$	50.00
			Include gas, maintenance, bus or train fare.		· <del></del>	
			car payments.	12.	\$	120.00
13.	Ente	rtainment,	, clubs, recreation, newspapers, magazines, and books	13.	\$	20.00
14.	Char	ritable con	tributions and religious donations	14.	\$	0.00
15.	Insur	rance.				
			nsurance deducted from your pay or included in lines 4 or 20.			
		Life insur		15a.	•	0.00
	15b.	Health ins	surance	15b.	*	0.00
	15c.	Vehicle in	nsurance	15c.	\$	191.00
	15d.	Other ins	urance. Specify:	15d.	\$	0.00
	Spec	cify:	nclude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
17.			lease payments:		_	
			nents for Vehicle 1	17a.	·	0.00
			nents for Vehicle 2	17b.		0.00
			pecify: Affirm (Aligners)	17c.	·	76.00
		Other. Sp	·	17d.	\$	0.00
18.			s of alimony, maintenance, and support that you did not report a		¢.	0.00
40			your pay on line 5, Schedule I, Your Income (Official Form 106)	). <sup>18.</sup>	· ·	
19.			ts you make to support others who do not live with you.	40	\$	0.00
20	Spec		control company and in clouded in lines 4 on 5 of this forms on on Co	19.	!	
20.			perty expenses not included in lines 4 or 5 of this form or on Sc	neauie i: Yo 20a.		0.00
		Real esta	es on other property	20a. 20b.		0.00
				20b. 20c.		0.00
			homeowner's, or renter's insurance			0.00
			nce, repair, and upkeep expenses	20d.	· —	0.00
			ner's association or condominium dues	20e.	•	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
22.	Calc	ulate vour	monthly expenses			
		-	4 through 21.		\$	3,691.21
			22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	
			2a and 22b. The result is your monthly expenses.	_	\$	3,691.21
	220. /	Auu IIIIe 22	za anu 22b. The result is your monthly expenses.		Ψ	3,091.21
23.	Calc	ulate your	monthly net income.			
	23a.	Copy line	e 12 (your combined monthly income) from Schedule I.	23a.	\$	3,692.38
	23b.	Copy you	ur monthly expenses from line 22c above.	23b.	-\$	3,691.21
	23c.		your monthly expenses from your monthly income. It is your <i>monthly net income</i> .	23c.	\$	1.17
24.	For ex modifi	xample, do y ication to the	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you eterms of your mortgage?			or decrease because of a
	■ No		[Fig. 1]			
	☐ Ye	es.	Explain here:			

Fill in this info	ormation to identify your	case:		
Debtor 1	Michael David Li	es		
	First Name	Middle Name	Last Name	
Debtor 2	Melissa Christine	Lies		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number (if known)				☐ Check if this is an amended filing
	<u>rm 106Dec</u> I <mark>tion About a</mark>	an Individua	l Debtor's Schedu	iles 12/15
obtaining mone years, or both.		n connection with a ban		false statement, concealing property, or to \$250,000, or imprisonment for up to 20
Did you p	pay or agree to pay some	eone who is NOT an atto	rney to help you fill out bankruptc	r forms?
■ No				
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sun	nmary and schedules filed with this	s declaration and
X /s/ Mi	chael David Lies		X /s/ Melissa Christin	e Lies
	ael David Lies		Melissa Christine L	
Signat	ture of Debtor 1		Signature of Debtor 2	
Date	November 27, 2019		Date November 27	<sup>7</sup> , 2019

	n this inforn	nation to identify you	. casa.			
Debt		Michael David Li				
Debi	.01 1	First Name	Middle Name	Last Name		
Debt		Melissa Christin				
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA		
Case (if kno	e number wn)				_	theck if this is an mended filing
Sta Be as	s complete a	of Financial	ble. If two married people a		ankruptcy equally responsible for sup	
numl	oer (if knowr	n). Answer every ques			, additional pages, write you	ir name and odde
Part			rital Status and Where You	ı Lived Before		
1. '	What is your	current marital statu	s?			
	■ Married □ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you li	ived in the last 3 years. Do n	ot include where you live now	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
l	Fill in the tota	I amount of income you	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
1	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$49,933.97	■ Wages, commissions, bonuses, tips	\$4,856.91
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debto Debto		chael David Ilissa Christi					Case	e number (if known)		
				Debtor 1 Sources of ir Check all that		Gross incom (before deduce exclusions)		Debtor 2 Sources of ind Check all that a		Gross income (before deductions and exclusions)
		dar year: December 31	, 2018 )	■ Wages, co	mmissions,	\$5	4,096.32	■ Wages, combonuses, tips	nmissions,	\$2,256.25
				☐ Operating	a business			☐ Operating a	business	
		dar year befor December 31		■ Wages, co	mmissions,	\$5	0,009.24	■ Wages, combonuses, tips	nmissions,	\$2,293.75
				☐ Operating	a business			☐ Operating a	business	
W	innings. I	f you are filing	a joint cas	e and you have	income that y	ou received toge	ether, list it o	nly once under D	ebtor 1.	d gambling and lottery
				Debtor 1 Sources of in Describe below		Gross incomeach source (before deduce exclusions)		Debtor 2 Sources of ind Describe below		Gross income (before deductions and exclusions)
		1 of current y iled for bankr		Federal Tax	Return	\$	7,426.00			
		dar year: December 31	, 2018 )	Federal Tax	Return	\$	66,304.00			
		dar year befor December 31		Federal Tax	Return	\$	3,393.00			
Part 3	3: List	Certain Paym	nents You	Made Before	ou Filed for E	Bankruptcy				
6. A	_	Neither Debt individual prin During the 90 No. 0	or 1 nor D narily for a	personal, famil	imarily consu y, or household	mer debts. Cond purpose."		s are defined in 11		1(8) as "incurred by an
		p n	aid that cre	editor. Do not in payments to an	clude payment attorney for th	ts for domestic s is bankruptcy ca	support oblig ase.	ations, such as ch	nild support a	ne total amount you nd alimony. Also, do
•	Yes.	Debtor 1 or I	Debtor 2 o	r both have pr	imarily consu	mer debts.		or after the date of \$600 or more?	·	
		J	•	•	bankrupicy, dic	i you pay arry cr	editor a total	or \$600 or more		
		■ Yes L	nclude pay	each creditor to	stic support ob			the total amount port and alimony.		creditor. Do not nclude payments to an
C	Creditor'	s Name and A	ddress	Da	ites of paymei	nt Total	amount paid	Amount you still owe	Was this p	payment for

	tor 1 Michael David Lies tor 2 Melissa Christine Lies		Ca	se number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
	Nation Star P.O. Box 650783 Dallas, TX 75265	10/16/19 - \$1079.21 9/17/19 - \$1079.21 8/16/19 - \$1079.21	\$3,237.63	\$134,991.00	■ Mortgag □ Car □ Credit C □ Loan Re □ Supplier □ Other	ard payment s or vendors
	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger control, or owner of 20% of	neral partners; partn or more of their votin	erships of which you	ou are a gener ny managing a	al partner; corporation agent, including one fo
	No					
	<ul><li>Yes. List all payments to an insider.</li><li>Insider's Name and Address</li></ul>	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	Jeff Lies 141 Aquarius Ave Palm Bay, FL 32909	January-July 2019 at \$310 a month	\$2,170.00	\$7,000.00	Paying ba	ck for loan for eptic.
	■ No □ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment ditor's name
Par	4: Identify Legal Actions, Repossession	ns and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No	cy, were you a party in ar				
	Yes. Fill in the details.	Nature of the case	Court or agency	•	Status of the	10 C350
	Case number	reduce of the base	Court of agency		Olulus of th	io dasc
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed,	foreclosed, garni	shed, attache	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the propert
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec  No Yes. Fill in the details.			inancial institution	n, set off any	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date take	action was	Amoun
				tako	-	

**Michael David Lies** 

	otor 1 otor 2	Melissa Christine Lies		Case nu	mber (ii	f known)	
12.	court	e-appointed receiver, a custodian, o No		was any of your property in the possession oner official?	of an as	ssignee for the bend	efit of creditors, a
		Yes					
Par	t 5:	List Certain Gifts and Contribution	ns				
13.	<b>=</b> 1	n 2 years before you filed for bankr No Yes. Fill in the details for each gift.	ruptcy,	did you give any gifts with a total value of m	nore tha	an \$600 per person	?
	Gifts	s with a total value of more than \$60 person	00	Describe the gifts		Dates you gave the gifts	Value
		on to Whom You Gave the Gift and ress:	İ				
14.	<b>=</b> 1	No		did you give any gifts or contributions with	a total	value of more than	\$600 to any charity?
	Gifts more Chai	Yes. Fill in the details for each gift or one of the contributions to charities that the chan \$600 rity's Name ress (Number, Street, City, State and ZIP Cod	total	Describe what you contributed		Dates you contributed	Value
Par	t 6:	List Certain Losses					
15.	or ga	mbling?	uptcy o	r since you filed for bankruptcy, did you lose	e anyth	ing because of the	t, fire, other disaster
	Desc	Yes. Fill in the details.  cribe the property you lost and the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pendance claims on line 33 of Schedule A/B: Property		Date of your loss	Value of property lost
Par	t 7:	List Certain Payments or Transfer	s				
16.	Includ	ulted about seeking bankruptcy or de any attorneys, bankruptcy petition p No Yes. Fill in the details.	prepar	ers, or credit counseling agencies for services re		in your bankruptcy.	
	Add Ema	on Who Was Paid ress ill or website address on Who Made the Payment, if Not \	You	Description and value of any property transferred		Date payment or transfer was made	Amount of payment
	180 <sup>2</sup> Suit	o & Crowder PA 1 Sarno Rd. se 1 bourne, FL 32935				11/25/19	\$1,500.00
17.	prom		ditors	did you or anyone else acting on your behalf or to make payments to your creditors? sted on line 16.	pay or	transfer any prope	rty to anyone who
	_	No Yes. Fill in the details.					
	Pers Add	on Who Was Paid ress		Description and value of any property transferred		Date payment or transfer was made	Amount of payment

Debtor 1 Michael David Lies
Debtor 2 Melissa Christine Lies

Case number (if known)

	Person Who Was Paid Address	Description and v transferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment
	National Debt Relief 180 maiden lane 30th floor new york, NY 10038				9/27/19, 10/12/19, 10/27/19, 11/12/19	\$1,011.00
	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your businclude both outright transfers and transfers made include gifts and transfers that you have already lis No  Yes. Fill in the details.	ness or financial affa as security (such as t	<b>iirs?</b> he granting of a sec		• •	
	Person Who Received Transfer Address		Description and value of payme paid in			Date transfer was made
	Person's relationship to you			4050.00		
	Junk Yard Orlando, FL	2000 Mazda Pro	tege	\$250.00		Summer 2018
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details.		y property to a sel	lf-settled tru	st or similar device o	of which you are a
	Name of trust	d	Date Transfer was			
		<b>P</b>	alue of the proper	,		made
	8: List of Certain Financial Accounts, Instru	•	•	•		
	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associat  No	ther financial accour	nts; certificates of		•	
	Yes. Fill in the details.					
	Name of Financial Institution and La	ast 4 digits of ecount number	Type of account instrument	clos	e account was sed, sold, ved, or asferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed for	bankruptcy, any s	safe deposit	box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the c	ontents	Do you still have it?
22.	Have you stored property in a storage unit or p	lace other than your	home within 1 yea	ar before yo	u filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)			ontents	Do you still have it?

	tor 2 Melissa Christine Lies		Ca	ase number (if known)							
Par	t 9: Identify Property You Hold or Control for S	Someone Else									
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any proper	ty y	ou borrowed from, are storing for	, or hold in trust						
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value						
Par	t 10: Give Details About Environmental Informa	tion									
For	the purpose of Part 10, the following definitions a	apply:									
	Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, ground	_	•							
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s		law,	, whether you now own, operate, o	or utilize it or used						
	Hazardous material means anything an environmental hazardous material, pollutant, contaminant, or s		wa	ste, hazardous substance, toxic s	substance,						
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of wher	1 the	ey occurred.							
24.	Has any governmental unit notified you that you	may be liable or potentially liable	un	der or in violation of an environme	ental law?						
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any i	·									
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental I t, City, State and know it		Date of notice						
26.	Have you been a party in any judicial or adminis	trative proceeding under any envi	ron	mental law? Include settlements a	and orders.						
	■ No □ Yes. Fill in the details.										
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	iture of the case	Status of the case						
Par	t11: Give Details About Your Business or Conr	nections to Any Business									
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have an	ıy oʻ	f the following connections to any	business?						
	☐ A sole proprietor or self-employed in a tr	rade, profession, or other activity,	eith	ner full-time or part-time							
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (l	LLP)							
	☐ A partner in a partnership										
	☐ An officer, director, or managing executi	ve of a corporation									
	☐ An owner of at least 5% of the voting or	equity securities of a corporation									

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	otor 1 Michael David Lies otor 2 Melissa Christine Lies	Ca	ase number (if known)
		I in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed
28.	institutions, creditors, or other parties.	tcy, did you give a financial statement to a	nyone about your business? Include all financial
	<ul><li>No</li><li>Yes. Fill in the details below.</li></ul>		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	t 12: Sign Below		
are t with		false statement, concealing property, or o	declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
/s/	Michael David Lies	/s/ Melissa Christine Lies	
	chael David Lies nature of Debtor 1	Melissa Christine Lies Signature of Debtor 2	
Dat	e November 27, 2019	Date November 27, 2019	
Did ■ N □ Y		ent of Financial Affairs for Individuals Filir	ng for Bankruptcy (Official Form 107)?
<b>=</b> N	•		•
ЦY	es. Name of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).

Fill in this inforn	nation to identify your case:		
Debtor 1	Michael David Lies First Name Middle Name	e Last Name	
Debtor 2	Melissa Christine Lies	Last Name	
(Spouse if, filing)	First Name Middle Name	e Last Name	
United States Bar	nkruptcy Court for the: MIDDLE DISTR	RICT OF FLORIDA	
Case number			☐ Check if this is an
			amended filing
00000	400		
Official For		ividuale Filine Under Chart	<b>7</b>
Statemen	it of intention for ind	ividuals Filing Under Chapte	<b>er /</b> 12/15
	vidual filing under chapter 7, you must	t fill out this form if:	
_	ed personal property and the lease has	s not expired	
You must file this	s form with the court within 30 days aft ver is earlier, unless the court extends	ter you file your bankruptcy petition or by the date s the time for cause. You must also send copies to the	
	ople are filing together in a joint case, d date the form.	both are equally responsible for supplying correct i	nformation. Both debtors must
	and accurate as possible. If more space our name and case number (if known).	e is needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Yo	our Creditors Who Have Secured Claim	ıs	
1. For any creditorinformation be		e D: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
Identify the cre	editor and the property that is collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's <b>M</b> name:	r. Cooper	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of	164 Hawthorne Ln NE Palm	Retain the property and enter into a	Yes
•	Bay, FL 32907	Reaffirmation Agreement.	
property securing debt:	Residence: 3 bedroom 2 bath 1700 square feet 1981	☐ Retain the property and [explain]:	
	•		
	our Unexpired Personal Property Lease		ad Lagge (Official Form 106C) fill
in the information	n below. Do not list real estate leases.	ed in Schedule G: Executory Contracts and Unexpir Unexpired leases are leases that are still in effect; the if the trustee does not assume it. 11 U.S.C. § 365(p)	ne lease period has not yet ended.
Describe your u	nexpired personal property leases		Will the lease be assumed?
Lessor's name:			□ No
Description of lea Property:	isea		☐ Yes
Lessor's name: Description of lea	ased		□ No
Property:			☐ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	Michael David Lies Melissa Christine Lies	Case number (if known)
Lessor's		□ No
Property:	on of leased	☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's		□ No
Description Property:	on of leased	☐ Yes
Lessor's		□ No
Property:	on of leased	☐ Yes
Part 3:	Sign Below	
	nalty of perjury, I declare that I have indicated r that is subject to an unexpired lease.	ny intention about any property of my estate that secures a debt and any personal
	Michael David Lies	X /s/ Melissa Christine Lies
	hael David Lies	Melissa Christine Lies
Sigr	eature of Debtor 1	Signature of Debtor 2
Date	November 27, 2019	Date November 27, 2019

Fill in	this inforr	nation to identify your case:						lirected	I in this form and	in Form
Debto	or 1	Michael David Lies			122	2A-1Su <sub>l</sub>	op:			
Debto	or 2 e, if filing)	Melissa Christine Lies			•	■ 1. Th	ere is no pres	umptio	n of abuse	
, .		Sankruptcy Court for the: Middle District of F	lorido		[	<b>□</b> 2. Tr	e calculation t	o dete	rmine if a presum	ption of abuse
Office	u States E	Middle District of F	ionua		—		oplies will be r alculation (Off		nder <i>Chapter 7 N</i>	leans Test
	number				_     _	_				,
(if knov	vn)								not apply now bed be but it could app	
					ļ	□ Che	ck if this is a	n ame	ended filing	
Offi	cial F	orm 122A - 1								
Cha	apter	7 Statement of Your Cur	rent Mo	on	thly Inc	ome	)			10/19
attach case n	a separate umber (if k ing militar	and accurate as possible. If two married people as sheet to this form. Include the line number to we known). If you believe that you are exempted from y service, complete and file Statement of Exempticulate Your Current Monthly Income	hich the addit n a presumpti	iona on c	al information a of abuse becaus	pplies. se you d	On the top of a lo not have pri	ny addi narily c	tional pages, write consumer debts or	your name and because of
	-	our marital and filing status? Check one on	ly.							
	☐ Not ma	arried. Fill out Column A, lines 2-11.								
	■ Marrie	<b>d and your spouse is filing with you.</b> Fill ou	t both Colum	ns /	A and B, lines	2-11.				
	☐ Marrie	d and your spouse is NOT filing with you. `	ou and you	ır sı	pouse are:					
	☐ Livii	ng in the same household and are not lega	lly separate	d. F	ill out both Col	umns A	and B, lines 2	2-11.		
	pen	ng separately or are legally separated. Fill of alty of perjury that you and your spouse are le g apart for reasons that do not include evadin	gally separa	ted	under nonbanl	kruptcy	law that appli	es or th		
101 the	I(10A). For 6 months,	rage monthly income that you received from all sexample, if you are filing on September 15, the 6-madd the income for all 6 months and divide the total he same rental property, put the income from that property.	onth period wo by 6. Fill in the	uld b	be March 1 throu ult. Do not includ	ıgh Augu le any in	ist 31. If the amo	ount of your	our monthly income once. For example	e varied during e, if both
						Colum Debto		Deb	ımn B tor 2 or -filing spouse	
		ss wages, salary, tips, bonuses, overtime, aductions).	and commis	sio	ns (before all	\$	4,537.75	\$	470.84	
3.	Alimony a	and maintenance payments. Do not include	payments fro	om a	a spouse if	\$	0.00	*_ \$	0.00	
		is filled in.	id for house	hal	ld avnances	Ψ	0.00	Ψ	0.00	
1	<b>of you or</b> from an ur and roomi	nts from any source which are regularly payour dependents, including child support.  married partner, members of your household mates. Include regular contributions from a spont include payments you listed on line 3.	Include regu , your depen	ılar ( den	contributions ts, parents,	\$	0.00	\$	0.00	
5.	Net incon	ne from operating a business, profession,		\ <b>-</b>  - 4	4					
	_				or 1					
		eipts (before all deductions)	\$ <u>0.0</u> -\$ 0.0							
	-	and necessary operating expenses	· <del></del>		Copy here ->	\$	0.00	\$	0.00	
		nly income from a business, profession, or farr	n \$	_	oopy here ->	Ψ	0.00	Ψ	<u> </u>	
6.	Met ilicon	ne from rental and other real property	D	ebt	or 1					
	Gross rec	eipts (before all deductions)	\$ 0.0							
		and necessary operating expenses	-\$ 0.0							
	•	nly income from rental or other real property	*		Copy here ->	\$	0.00	\$	0.00	

Official Form 122A-1

0.00

\$

7. Interest, dividends, and royalties

0.00

ebtor 1 ebtor 2	Michael David Lies Melissa Christine Lies			Case numb	er ( <i>if known</i> )			
				Column A Debtor 1		Column E Debtor 2 non-filing	or	
Un	employment compensation			\$	0.00	\$	0.00	
	not enter the amount if you contend that the ar Social Security Act. Instead, list it here:		nefit under					
	For you	\$	0.00					
F	For your spouse	\$	0.00					
ber not Uni disa pay doe	nsion or retirement income. Do not include a nefit under the Social Security Act. Also, except include any compensation, pension, pay, annuted States Government in connection with a diability, or death of a member of the uniformed sypaid under chapter 61 of title 10, then include as not exceed the amount of retired pay to whice tired under any provision of title 10 other than	as stated in the next sen uity, or allowance paid by sability, combat-related in services. If you received a that pay only to the exten th you would otherwise be	tence, do the jury or iny retired it that it	\$	0.00	\$	0.00	
Do rec dor Uni dis	ome from all other sources not listed above not include any benefits received under the Science as a victim of a war crime, a crime againment terrorism; or compensation, pension, parted States Government in connection with a diability, or death of a member of the uniformed surces on a separate page and put the total belo	cial Security Act; paymen st humanity, or internation y, annuity, or allowance p sability, combat-related in services. If necessary, list	nts nal or aid by the jury or					
	•			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if ar	y.	+	\$	0.00	\$	0.00	
rt 2:	Determine Whether the Means Test App	lies to You					Total cr income	urrent monthly
2. <b>Ca</b>	culate your current monthly income for the	year. Follow these steps:	:					
12a	a. Copy your total current monthly income from	line 11		Co	py line 11 l	nere=>	\$	5,008.59
	Multiply by 12 (the number of months in a ye	ar)					<b>x</b> 1	2
401		•				4.0		2 60,103.08
121	b. The result is your annual income for this part	of the form				12	2b.  \$	0,103.06
3. <b>Ca</b> l	culate the median family income that applie	es to you. Follow these st	eps:					
Fill	in the state in which you live.	FL						
Fill	in the number of people in your household.	6						
То	in the median family income for your state and find a list of applicable median income amount this form. This list may also be available at the	s, go online using the link		in the sepa	rate instruc	13 tions	3. \$ <u>\$</u>	9,091.00
4. <b>Ho</b>	w do the lines compare?							
148		13. On the top of page 1,	check box	1, There is	no presum	nption of abu	ıse.	
14b	Go to Part 3.  Line 12b is more than line 13. On the Go to Part 3 and fill out Form 122A-2	, , , , ,	2, The pr	esumption (	of abuse is	determined	by Form 12	2A-2.
rt 3:	Sign Below	•						
	By signing here, I declare under penalty of pe	erjury that the information	on this sta	atement and	d in any atta	achments is	true and co	rrect.
	X /s/ Michael David Lies	X		ssa Chris				
	Michael David Lies Signature of Debtor 1			a Christing e of Debtor				

**Michael David Lies** 

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Debtor 1 Debtor 2	Michael David Lies Melissa Christine Lies		Case number (if known)	
Da	November 27, 2019 MM / DD / YYYY	Date	November 27, 2019 MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2	2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.			

Debtor 1	Michael David Lies		
	Melissa Christine Lies	Case number (if known)	

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period **05/01/2019** to **10/31/2019**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer : Brevard Public Schools

Constant income of \$4,537.75 per month.\*

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Debtor 1	Michael David Lies		
Debtor 2	Melissa Christine Lies	Case number (if known)	

#### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 05/01/2019 to 10/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Brevard Public Schools

Constant income of \$470.84 per month.\*

Debtor 1 Debtor 2 Michael David Lies

Melissa Christine Lies

Case number (if known)

#### \*Paycheck Details:

#### **Brevard Public Schools**

Date	Earnings	Overtime	Taxes	Other	Net Check
2019-05-15	2,890.98	0.00	383.83	169.72	2,337.43
2019-05-31	1,782.93	0.00	176.99	136.48	1,469.46
2019-06-14	1,829.68	0.00	185.11	137.88	1,506.69
2019-06-27	1,511.87	0.00	448.27	0.00	1,063.60
2019-06-27	2,798.66	0.00	366.03	166.95	2,265.68
2019-07-15	1,782.98	0.00	177.00	136.48	1,469.50
2019-07-15	123.75	0.00	9.46	3.71	110.58
2019-07-31	1,782.93	0.00	176.99	136.48	1,469.46
2019-08-15	1,828.80	0.00	184.96	137.96	1,505.88
2019-08-19	1,750.00	0.00	186.38	33.00	1,530.62
2019-08-30	1,828.78	0.00	184.95	137.96	1,505.87
2019-09-13	1,828.80	0.00	184.96	137.96	1,505.88
2019-09-30	1,828.78	0.00	184.95	137.96	1,505.87
2019-10-15	1,828.80	0.00	184.96	137.96	1,505.88
2019-10-31	1,828.78	0.00	184.95	137.96	1,505.87
Totals:	27,226.52	0.00	3,219.79	1,748.46	22,258.27

#### **Brevard Public Schools**

Date	Earnings	Overtime	Taxes	Other	Net Check
2019-05-15	362.50	0.00	32.05	0.00	330.45
2019-05-31	631.26	0.00	65.00	0.00	566.26
2019-06-14	93.75	0.00	8.29	0.00	85.46
2019-09-13	175.00	0.00	15.48	0.00	159.52
2019-09-30	175.00	0.00	15.48	0.00	159.52
2019-10-15	550.00	0.00	50.31	0.00	499.69
2019-10-31	837.50	0.00	102.31	0.00	735.19
Totals:	2,825.01	0.00	288.92	0.00	2,536.09

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	-
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court Middle District of Florida

In re	Melissa Christine Lies	Case No.		
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR M	MATRIX	
Гhe ab	ove-named Debtors hereby verify the	nat the attached list of creditors is true and co	rrect to the best	of their knowledge.
Date:	November 27, 2019	/s/ Michael David Lies		
		Michael David Lies	Michael David Lies	
		Signature of Debtor		
Date:	November 27, 2019	/s/ Melissa Christine Lies		
		Melissa Christine Lies		

Signature of Debtor

**Michael David Lies** 

Michael David Lies 164 Hawthorne Ln NE Palm Bay, FL 32907

Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040

Deptartment Store National Bank/Macy's Synchrony Bank/Amazon Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Melissa Christine Lies 164 Hawthorne Ln NE Palm Bay, FL 32907

Kohls/Capital One Attn: Credit Administrator Po Box 3043

Milwaukee, WI 53201

Synchrony Bank/QVC Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Michael Faro Faro & Crowder 1801 Sarno Road Suite 1 Melbourne, FL 32935 Mr. Cooper Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell, TX 75019

Target Attn: Bankruptcy Po Box 9475 Minneapolis, MN 55440

Affirm Inc Affirm Incorporated Po Box 720 San Francisco, CA 94104 Nelnet Loans Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501

USAA Federal Savings Bank Attn: Bankruptcy 10750 Mcdermott Freeway San Antonio, TX 78288

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Space Coast Credit Union Attn: Bankruptcy 8045 North Wickham Road Melbourne, FL 32940

Capital One Bank Usa N Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Syncb/HSN Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Chase Card Services Attn: Bankruptcv Po Box 15298 Wilmington, DE 19850

Syncb/PPC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Citibank Attn: Recovery/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Syncb/walmart Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

Department of Education/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Middle District of Florida

In	Michael David Lies re Melissa Christine Lies		Case No.					
		Debtor(s)	Chapter	7				
	DISCLOSURE OF COMPE			` ,				
1.	compensation paid to me within one year before the filin	suant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that appensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	1,165.00				
	Prior to the filing of this statement I have received			1,165.00				
	Balance Due		s	0.00				
2.	\$335.00 of the filing fee has been paid.							
3.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
4.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
	- Bootoi - Canor (speedly).							
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.							
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows.				aw firm. A			
6.	In return for the above-disclosed fee, I have agreed to re	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	<ul> <li>a. Analysis of the debtor's financial situation, and rende</li> <li>b. Preparation and filing of any petition, schedules, stat</li> <li>c. Representation of the debtor at the meeting of credite</li> <li>d. Representation of the debtor in adversary proceeding</li> <li>e. [Other provisions as needed]</li> </ul>	tement of affairs and plan which ors and confirmation hearing, ar	n may be required; nd any adjourned hea	-	ruptcy;			
7.	By agreement with the debtor(s), the above-disclosed fee	e does not include the followins	g service:					
		CERTIFICATION						
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the o	lebtor(s) in			
	November 27, 2019	/s/ Michael Faro						
	Date	Michael Faro 758 Signature of Attorne Faro & Crowder 1801 Sarno Road Suite 1	ey					
		Melbourne, FL 32						
		321-784-8158 Fa ahinkley@farolav						
		Name of law firm						